



**STATE OF MONTANA
DEPARTMENT OF CORRECTIONS
POLICY DIRECTIVE**

Policy No. DOC 1.3.44	Subject: TELEWORK
Chapter 1: ADMINISTRATION AND MANAGEMENT	Page 1 of 6 and Attachments
Section 3: Human Resources Bureau	Effective Date: July 26, 2006
Signature: /s/ Mike Ferriter, Director	Revision Date:

I. POLICY

The Department of Corrections encourages alternative work arrangements when it is mutually beneficial to the work unit and employee, meets the Department mission and goals, and maintains established job performance standards.

II. APPLICABILITY

All Department divisions, facilities, and programs.

III. REFERENCES

- A. 3-0175; *Montana Operations Manual*
- B. *DOC Policy 1.1.1, Purpose, Mission, and Management Philosophy*

IV. DEFINITIONS

Telework – A flexible work arrangement where an employee may be permitted to work from an alternative worksite one or more days a week. Also referred to as telecommuting.

Alternative Worksite – A work location other than the central worksite, which may be located in the employee's home or at a satellite office in proximity to the employee's home, as specified in the telework agreement.

Central Worksite – An employee's traditional office or workplace.

V. DEPARTMENT DIRECTIVES

A. General Requirements

1. To the extent possible, all eligible employees will be given equal opportunity to telework; however, position duties, equipment availability, budgetary impact, or other factors may limit the Department's ability to approve telework.
2. Under a telework agreement, employees are expected to comply with all applicable Department policies, procedures, legal requirements, and regulations. Failure to comply may result in the loss of telework privileges and disciplinary action.
3. A telework arrangement may be brief, i.e., not to exceed a set number of weeks, or permanent; and may be either part-time or full-time.
4. Department telework sites must be in Montana.

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5. The Department does not guarantee the approval of telework arrangements.

B. Selection Criteria

1. Supervisors will complete a written cost-benefit analysis of all telework requests.
2. The analysis must establish that the telework arrangement is in the Department's best interests. The analysis will consider the following eligibility criteria:
 - a. Length of Employment
 - employees must have worked for the Department a minimum of one year
 - b. Work Habits
 - employees must have demonstrated self-motivation, self-discipline, and the ability to work independently, manage distractions, and meet deadlines
 - supervisors must consider past job performance
 - there must be a process to measure the employee's telework work performance and production
 - c. Position
 - the telework position must have a sufficient number of tasks that may be performed with a minimum of direct supervision or contact with customers
 - the position's need for specialized material must be minimal or flexible
 - the employee's work objectives and tasks must be clearly defined with measurable results
 - a current telework position description must be on file with the Human Resource office prior to job implementation
 - d. Customer Service
 - the telework schedule must be arranged so that there is no difference in the level of customer service and so that workplace location is not noticeable to the customer
 - e. Location of Work
 - the work location must not significantly alter the employee's job content or co-workers' job content
 - f. Cost
 - the telework arrangement must be in the financial best interest of the Department which is in no way obligated to expend funds to make telework possible for employees
 - g. Support Services
 - the employee's needs for computer technical support must be minimal and cost-effective for the Department
 - the employee will not hold business meetings with clients, customers, the public, or professional colleagues at his or her residence

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C. Covered and Non-covered Expenses

1. For telework positions:
 - a. duties, obligations, responsibilities, and conditions of employment with the Department remain unchanged; and
 - b. salary, retirement benefits, and state-sponsored insurance coverage remain unchanged.
2. The Department will:
 - a. reimburse business telephone calls when the employee submits receipts;
 - b. provide the necessary office supplies for use at the telework site; and
 - c. *may* elect to provide telephone, Internet, Intranet, and other computer connections to allow the employee to conduct his or her job duties at the telework site based on the cost-benefit analysis.
3. The Department will *not*:
 - a. pay for the employee's travel time between the telework site and central worksite; or
 - b. pay for the employee's home heat, light, power, and insurance expenses.

D. Equipment and Documents

1. The Department may provide the necessary equipment and supplies or permit employee-owned equipment to be used. The Information and Business Technology Bureau must approve all computer equipment used to connect to state resources.
2. The employee must immediately bring to the attention of his or her supervisor any needed repair of state-owned equipment. Such repair is the responsibility of the Department unless damage was caused by employee negligence or a by a member of the employee's household. Repairs to employee-owned equipment are the employee's responsibility.
3. All state-owned equipment is covered by insurance administered through the Risk Management and Tort Defense Division. The Department must provide an itemized list of all state-owned equipment, including serial numbers, located at the telework site to the RMTD division.
4. The employee will maintain the confidentiality of restricted Department materials and information, and may need special permission from his or her supervisor to take certain materials to the telework site; if so, this must be described in the attached telework agreement. The employee will be required to provide adequate and secure storage for all records taken to or produced at the telework site.
5. Software, products, documents, and records used or developed while in a telework status remain the property of the Department of Corrections and are to be used only for business purposes. In accordance with state policy, employees are prohibited from using the software, products, documents, and Department-owned equipment or supplies for personal use and are also subject to Department policy regarding records retention.

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6. The employee will ensure that any Department documents or data stored on the remote computer is backed up and recoverable.

E. Security, Safety, Insurance, Liability, and Taxes

1. The employee's home office must be covered by liability insurance.
2. Employees are encouraged to consult their insurance agent and a tax consultant for information regarding home-based worksites.
3. During work hours and while performing functions in the designated "work area" of the home, employees are covered by workers' compensation insurance. Any accident occurring outside this area is the employee's responsibility. The employee is responsible for avoiding work that is not normally a part of the job when at the telework site, e.g., heavy lifting, and for taking normal precautions to avoid accidents. The employee must immediately report any injury to the supervisor.
4. In case of injury, theft, loss, or tort liability related to telework, the employee must allow agents of the state to investigate and inspect the telework site. The telework site may also be inspected by the supervisor who will provide the employee with reasonable notice of inspection and investigation.

F. Dependent Care

1. Employees must manage dependent care and personal responsibilities in a way that allows them to successfully meet job responsibilities. If dependent care was required for office work, it will likely be required for telework. Telework may not be used as a substitute for full-time dependent care. This does not mean that dependents will be absent from the home during telework hours; it means that they will not require the employee's attention during work hours.

G. Implementation

1. The requesting employee must complete Sections 1 & 2 (Telework Application and Self-Assessment) of the Telework Agreement (see Attachment A), then sign Section 3, Employee Acceptance statement, and submit the agreement to his or her supervisor.
2. The supervisor will complete and sign Section 3, Proposal Acceptance Supervisor Review, only after a cost-benefit analysis is completed. The supervisor must document the reasons for proposal modification or a telework denial.
3. The supervisor and employee will complete Section 4, Agreement, together. The telework agreement must cover the telework site, schedule, tasks to be preformed, equipment to be used, payment of expenses, communication, dates for teleworking, and any special arrangements.
4. A designated IT staff member will complete and sign Section 5, Equipment, and schedule any needed equipment installations.
5. A Department budget analyst will complete and sign Section 6, Expenses.

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6. If the telework site is located in the employee's home, the employee will establish and maintain the worksite free from distractions. The site will be a separate office area with the ability to accommodate office furniture, equipment, and storage designated for Department work. The supervisor will inspect the office and complete Section 7, Safety and Security Checklist.
7. The supervisor and employee will sign Section 8, Acceptance, retain copies, and forward the agreement to the division administrator and the Human Resources Bureau for approval.
8. The Human Resources Bureau will place a copy of the telework agreement in the employee file.
9. The supervisor and employee will periodically review the telework agreement and revise it as needed.
10. The employee will complete the Monthly Telework Feedback Form, Attachment B, and submit it to the supervisor as a way to identify problems and facilitate regular communication between the employer and supervisor.

H. Support of Information Technology

1. The Department's IT staff is not responsible to troubleshoot or repair personally owned computers, connected devices (i.e., printers, modems, scanners, firewalls), operating systems, productivity software, connectivity software, or Internet connections.
2. IT staff will support the connections it provides once the external device connects to the State network. This support is limited to authentication services and Department data systems to which the employee is connected.
3. Support for Department owned equipment that cannot be connected remotely will be provided by a technician at a Department office as scheduled during regular business hours.

I. Termination

1. Telework is voluntary. A telework agreement may be terminated at any time by either the Department of Corrections or the employee. Employees have the right to cease telecommuting and return to their former in-office work arrangement after reasonable notice. The reason for and date of withdrawal will be documented and filed with the original telework agreement.
2. Upon termination of the telework agreement, the employee will delete all Department documents and data from the personal computer.

VI. CLOSING

Provisions of this policy not required by statute will be followed unless they conflict with negotiated labor contracts that take precedence to the extent applicable.

Questions concerning this policy should be directed to the Human Resources Bureau.

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VII. ATTACHMENTS

Telework Agreement (Attachment A)
Monthly Telework Feedback Form (Attachment B)

TELEWORK AGREEMENT

SECTION 1 – TELEWORK APPLICATION

Instructions: Employee completes Sections 1 & 2 and signs Section 3 and then gives the Agreement to the supervisor for completion.

Date of Request:

Employee Information

Name: _____ Central Office Phone: _____
Job Title: _____
Division: _____ Supervisor: _____ Phone: _____
Proposed Telework Location: ☐ Home ☐ Satellite Office ☐ Other: _____
Telework Address: _____ City: _____
Telework Phone: _____
Telework Office E-mail (if different from central office): _____

Proposed Telework Schedule

Days you propose to telework: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Is this a temporary telework arrangement? ☐ Yes ☐ No

If yes, length of arrangement?

Daily schedule:

Total hours per day:

Start: _____ Finish: _____

Lunch: _____ to _____

Tasks / Assignments

Proposed tasks or assignments to be completed on telework days:

How will your proposed telework schedule sustain or enhance your ability to complete your job and your division's ability to meet its goals/mission?

What potential problems could your changed schedule create with each of the following groups and how do you suggest overcoming them?

- a. Customers:
- b. Co-workers:
- c. Your supervisor:

What cost savings to the department do you anticipate from your schedule?

What reasonable work products and evaluation criteria would you propose for you and your supervisor to assess how your performance is meeting or exceeding expectations?

How frequently do you propose progress be monitored?

Dependent Care

Do you have dependents requiring care during telework hours? ☐ Yes ☐ No

If yes, what arrangements have you made for dependent care to relieve you from primary-care responsibilities during telework hours?

Accessibility Information

How can you be contacted when you telework? ☐ Phone ☐ Voice mail/answering machine ☐ E-mail

☐ Other:

Equipment

What equipment and software will you provide?

- ☐ Phone ☐ Voice mail ☐ Second phone line ☐ Office furniture ☐ Fax machine
☐ Internet service provider:
☐ Computer type and model:
☐ Printer type and model:
☐ Connection type :

Operating system:

Software:

Surge protection type: Make this a Yes No is fine

Other equipment not mentioned above:

Remote access requested? ☐ Yes ☐ No

SECTION 2 - SELF-ASSESSMENT

A successful teleworker has particular traits, a job suitable for telework and a telework office that is conducive to work. Read each of the numbered sections below, and check the box that most accurately describes you and your situation. Your self-assessment will help you decide whether telework is right for you. See the end of this Self-Assessment for help in evaluating your results.

1. Successful teleworkers develop regular routines and are able to set and meet their own deadlines. Are you self-motivated, self-disciplined, and able to work independently? Can you complete projects on time with minimal supervision and feedback? Are you productive when no one is checking on you or watching you work?
☐ Always ☐ Usually ☐ Sometimes ☐ Not really
2. Do you have strong organizational and time-management skills? Are you results-oriented? Will you remain focused on your work while at home, and not be distracted by television, housework, or visiting neighbors? Do you manage your time and workload well, solve many of your own problems, and find satisfaction in completing tasks on your own? Are you comfortable setting priorities and deadlines? Do you keep your sights on results?
☐ Always ☐ Usually ☐ Sometimes ☐ Not really
3. Are you comfortable working alone and disciplined enough to leave work at quitting time? Can you adjust to the relative isolation of working at home? Will you miss the social interaction at the central office on your telework days? Do you have the self-control to work neither too much nor too little? Can you set a comfortable and productive pace while working at home?
☐ Yes ☐ No
4. Teleworkers should have a good understanding of the department's "culture". Are you knowledgeable about the department's procedures and policies? Have you been on the job long enough to know how to do your job in accordance with procedures and policies? Do you have well-established work, communication and social patterns at the central office?
☐ Yes ☐ No
5. Have you and your supervisor discussed whether co-workers would have additional work when you work at home, and if so, how the work would be handled? Have you determined how to provide support to co-workers while working at home? Do you have an effective work relationship with co-workers? Have you evaluated the effects of your telework days and those of your co-workers in maintaining adequate in-office communication?
☐ Yes ☐ No

6. Are you adaptable to changing routines and environments? Have you demonstrated an ability to be flexible about work routines and environments? Are you willing to come into the central office on a regularly scheduled telework day if your supervisor, co-workers or customers need you there?
☐ Yes ☐ No
7. Are you an effective communicator and team player? Do you communicate well with your supervisor and co-workers? Are you able to express needs objectively and develop solutions? Have you developed ways to communicate regularly with your supervisor and co-workers when you telework?
☐ Yes ☐ No
8. Current job performance is a strong indicator of your potential success as a teleworker. Consider how any problems or developmental needs evident in you last performance evaluation might affect your telework experience. Are you successful in your current position? Do you know your job well? Do you have a track record of performance?
☐ Yes ☐ Not really
9. Do you have the right job for telework?
- ☐ Job responsibilities that can be arranged so that there is no difference in the level of service provided to the customer.
 - ☐ Minimal requirements for direct supervision or contact with the customer.
 - ☐ Low face-to-face communication requirements with the ability to arrange days when communication can be handled by telephone or e-mail.
 - ☐ Minimal requirements for special equipment.
 - ☐ Ability to define tasks and work products with measurable work activities and objectives.
 - ☐ Ability to control and schedule work flow.
 - ☐ Tasks include those that could be done away from the central office such as:

Analysis	Graphics	Editing
Auditing reports	Project management	Evaluations
Batch work	Reading	Dictating
Budgeting	Record keeping	Writing
Calculating	Research	Design work
Computer programming	Typing/word processing	Sales
Contracts	Sending/receiving e-mail	Data entry
Spreadsheet analysis		
10. Do you have an appropriate home work environment?
- ☐ A safe, comfortable work space where it is easy to concentrate on work.
 - ☐ The level of security required by current state standards for information technology.
 - ☐ The necessary office equipment and software that meet the current state standards for hardware and software.
 - ☐ Household members who will understand you're working and won't disturb you.

Are you the right kind of worker? If your answers to Questions 1-8 are "Affirmative or Yes", you're the kind of employee likely to be successful at telework.

Do you have the right kind of job? You should be able to check every item under Question 9.

Do you have the right home environment? You should be able to check every item under Question 10.

SECTION 3 - PROPOSAL ACCEPTANCE

Employee Acceptance

I have read the Telework policy and understand the requirements and obligations that I am expected to accept and meet as a teleworker. I have also completed the Self-Assessment section and feel that I have the work habits, job type, and home office compatible with teleworking.

Applicant Signature:

Date:

Supervisor Review

Date of employee hire (*contact HR for date if needed*):

☐ Eligible to telework. (*Employee must be employed by DOC for 1 year prior to teleworking.*)

☐ Accepted as requested ☐ Modified and approved ☐ Denied

Reason for modification or denial:

Signature:

Date:

SECTION 4 - AGREEMENT

Instructions: After application approval, teleworker and supervisor complete Section 4 together.

Central Worksite

Address:

Will there be any sharing of or changes in work space when telework begins? ☐ Yes ☐ No
If yes, specify:

Schedule

☐ **Fixed** (*Telework days and hours are scheduled and will not be substituted without advance approval of the manager.*)

Telework days: ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

Telework time: Start: Finish: Total Hours Per Day:

Lunch from: to:

☐ **Flexible Schedule** Hours of Work Permitted:

Use of sick leave, vacation, other time off or leave credits, and overtime to be worked must be approved in advance by the supervisor. Employee may be required to return to the office to attend meetings, classes, and department events, as designated by supervisor.

Tasks

☐ There is a current and accurate job profile on file in the Human Resource Office.

Tasks for telework days:

Intervals for telework review:

Employee agrees to complete all assigned work according to procedures mutually agreed upon with his/her supervisor. Employee also agrees to provide reports and keep his/her supervisor informed of progress on assignments and of any problems experienced. A decline in performance may be grounds for canceling the Telework Agreement.

Inspections

In case of injury, theft, loss, or tort liability related to telework, the teleworker must allow agents of the state to investigate and/or inspect the telework site. The telework site may also be inspected by the supervisor. Reasonable notice of inspection and/or investigation will be given to the teleworker.

Communication

Will the following be utilized?

- Call forwarding? ☐ Yes ☐ No
- Answering machine or voice mail? ☐ Yes ☐ No
- Receptionist or co-workers take calls? ☐ Yes ☐ No
- Access to e-mail? ☐ Yes ☐ No

How will incoming calls to the central worksite be answered on telework days?

The employee agrees to call the office to obtain messages at least _____ times a day.

Call in times:

Other procedures:

The employee will promptly notify the supervisor when unable to perform work assignments due to equipment failure or other unforeseen circumstances.

Termination

Unless specified in OTHER ARRANGEMENTS, the agency and/or employee may discontinue this arrangement at anytime. Except in emergent situations, this will be done by giving one week's notice.

Other Arrangements

Additional conditions agreed upon by the employee and the supervisor:

SECTION 5 - EQUIPMENT

Instructions: This section should be completed with IT and must be signed off by the IT Bureau upon completion. After completing, this section must be copied and sent to Risk Management and Tort Defense.

The Department of Corrections is not responsible for any private property used, lost, or damaged. The state may pursue recovery from the employee for property that is deliberately or negligently damaged or destroyed while in the employee's care, custody, or control. The agency is responsible for the deductible on state property unless otherwise specified in this agreement under OTHER ARRANGEMENTS. Employees are advised to contact their insurance agent and a tax consultant for information regarding home worksites.

In the event of equipment failure, the employee may be assigned to another project and/or work location. The employee shall surrender all state-owned equipment and data documents immediately upon request.

The employee agrees that State equipment and systems will only be used by the employee for State business. The employee also agrees to protect the Department's records from disclosure and damage. The employee agrees to follow all applicable State and department policies in regard to computers and system use.

What equipment, hardware, and software will be used?

ITEM	TYPE	SERIAL #	PROGRAM	VERSION	OWNER
PC					
Monitor					
Surge Protector					
Printer					
Software					
Software					
Software					
Other:					
Other:					
Other:					

1. Will there be a connection to a state LAN or mainframe? ☐ Yes ☐ No
If yes list all State and Department computer resources you need to access.

2. Is there any other information technology security or access issue? ☐ Yes ☐ No
If yes, has advice been obtained from the IT Division? ☐ Yes ☐ No

An IT employee has reviewed the above equipment, hardware, and software and agrees that this list is compatible with the DOC system. The requirements and techniques for computer information security have been discussed with the employee and all concerns have been addressed.

IT Initials:

Date:

SECTION 6 - EXPENSES

Instructions: This section must be reviewed and signed by a Budget Analyst after completion.

The agency will pay for the following expenses:

- Charges for business related telephone calls. ☐ Yes ☐ No
- Maintenance and repairs to state-owned equipment. ☐ Yes ☐ No
- Other:

Claims will be submitted with receipt, bill, or other verification of the expense.

The agency will not pay for the following expenses:

- Maintenance or repairs of privately owned equipment.
- Utility costs associated with the use of the computer or occupation of the home.
- Liability insurance to cover the use of space in the home for work.
- Office supplies (these should be requisitioned through the main office).
- Travel expenses associated with commuting to the central worksite.

Budget has reviewed this section of the Telework Agreement and agrees that cost to the department will be minimal and acceptable.

Budget Signature:

Date:

SECTION 7 - SAFETY AND SECURITY CHECKLIST

Instructions: This section should be completed by the supervisor during an inspection of the worksite. Alternatively, it can be completed by the employee and reviewed by the supervisor.

YES	NO	Security
_____	_____	Are work materials and equipment in a secure place that can be protected from theft, damage, or misuse?
_____	_____	Are the security requirements in place to protect the confidentiality and security of state information and computer systems?
		Equipment
_____	_____	Are all machines properly grounded?
_____	_____	Are portable hand tools grounded or double insulated?
_____	_____	Are junction boxes closed?
_____	_____	Is all electrical equipment in good working condition?
_____	_____	Are all phone lines, electrical, and other cords kept out of the way?
_____	_____	Is there evidence of fraying on any electrical cords?
_____	_____	Is adequate amperage provided to the home and the work site?
_____	_____	Is the computer equipment connected to a surge protector?
		Fire Protection
_____	_____	Is a fire extinguisher readily available?
_____	_____	Is it fully charged and operable?
_____	_____	Are there smoke detectors in the work site?
_____	_____	Is there a smoke detector within hearing distance of the workspace?
_____	_____	Are the batteries or other power supplies of the smoke detectors checked regularly?
		Liability
_____	_____	Does the homeowner or renters' insurance cover business use in the home?
		Housekeeping
_____	_____	Is the work area clean and orderly?
_____	_____	Are aisles and doorways free of obstructions?
_____	_____	Are all spilled materials or liquids cleaned up immediately?
_____	_____	Is there combustible scrap, debris, and waste stored safely & removed from the worksite promptly?
_____	_____	Are the file cabinets arranged so drawers do not open into walkways?
_____	_____	Are carpets well secured to the floor and free of frayed or worn seams?
		Means of Exit
_____	_____	Are there enough exits to allow prompt escape?
_____	_____	Does the employee have easy access to exits?
		Materials Handling and Storage
_____	_____	Is adequate clearance allowed in aisles where materials must be moved?
_____	_____	Are tiered materials stacked, interlocked, locked, and limited in height to maintain stability?
_____	_____	Are storage areas kept free of tripping, fire, explosion, and pest hazards?

SECTION 8 - ACCEPTANCE

Effective Date of Telework Arrangement:

I have read and understand both the Telework Policy and this agreement and agree to abide by and operate in accordance with their terms and conditions. I agree that the sole purpose of this agreement is to regulate telework and that it neither constitutes an employment contract nor an amendment to any existing contract.

Human Resources:

Date:

Information Technology

Date:

Employee Signature:

Date:

Supervisor Signature:

Date:

Division Administrator:

Date:

MONTHLY TELEWORK FEEDBACK FORM

Name:

Date:

Reason for Telework:

What is working well?

Concerns: (check all that apply)

- ☐ Communications with manager
- ☐ Communication / Networking with peers
- ☐ Being adequately prepared for the work you do at home (e.g. having the right files and information, etc.)
- ☐ Your own ability to work independently and to set and meet deadlines
- ☐ Information Technology (IT) support
- ☐ Ergonomics / Safety
- ☐ Schedule
- ☐ Policies
- ☐ Equipment
- ☐ Other:

Give details for any concerns listed above:

To enhance this experience, my suggestions would be

Additional Comments: